## PART B - FEE(S) TRANSMITTAL

Complete any and this forty, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

MAR 2 0 2008

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS this form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected through 5 should be completed where appropriate. All further correspondence address as indicated unless corrected through 5 should be completed where appropriate and notification of maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

maintenance [ee notifications.  CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
136	7590 12/21	/2007				!!
JACOBSON HOLMAN PLLC 400 SEVENTH STREET N.W. SUITE 600				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
WASHINGTON	I, DC 20004					(Depositor's name)
						' (Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/560,601 12/13/2005		Nils G. Engstrom		P70990US0	6955	
TITLE OF INVENTION: LIQUID FLOW REGULATING DEVICE AND DYNAMOMETER TESTING DEVICE 03/21/2008 EHAILE2 00000012 10560601						
	:			01 FC:2		720.00 OP
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PÄID ISSU	ËFËE TOTAL FEE(S) DU	SWATE DUE
nonprovisional	YES ·	\$720	\$300	\$0	\$1020	03/21/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS			
ALLEN, ANDRE J		2855	073-861000			
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.      "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Please check the appropriate assignee category or categories (will not be printed on the patent):						
4a. The following fee(s) are submitted:  Issue Fee (720)  Publication Fee (No small entity discount permitted) (300)  Advance Order - # of Copies			A check is enclosed.  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached. (1020)  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 06-1358 (enclose an extra copy of this form).			
5. Change in Entity Sta	itus (from status indicate	d above)				
• •	ns SMALL ENTITY state		• • •		LL ENTITY status. See 37 (	
NOTE: The Issue Fee ar interest as shown by the	nd Publication Fee (if req records of the United Sta	uired) will not be accepte ites Patent and Trademark	d from anyone other the Office.	nan the applicant; a reg	istered attorney or agent; or	the assignee or other party in
Authorized Signature		Wolny		Date 20 Ma	arch 2008	
Typed or printed name John C. Holman			Registration No. 22,769			
This collection of inform an application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, Alexandria, Virginia 22	ed application form to the tions for reducing this bu Virginia 22313-1450. DO	CFR 1.311. The information U.S.C. 122 and 37 CFR to USPTO. Time will varied in the control of th	on is required to obtain 1.14. This collection is depending upon the chief Information COMPLETED FORM	n or retain a benefit by is estimated to take 12 individual case. Any conficer, U.S. Patent and IS TO THIS ADDRES	the public which is to file (a minutes to complete, includ omments on the amount of 1 Trademark Office, U.S. De S. SEND TO: Commissione	nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.